

Capital Area Narcotics Anonymous - NEW CASC HOME GROUP MOTION

Date: _____

Motion made by: _____

Motion reads as follows:

The following home group hereby motions to join Capital Area Narcotics Anonymous of NC.

Home group name: _____

Home group GSR or other point of contact (name, phone, email address): _____

Meeting location (facility name and physical address including room name/number, or online access info): _____

Special criteria for entering facility ('n/a' if none): _____

Day of week and meeting time start/end*: _____

The checked items below apply to this meeting*:

- | | | | |
|---|---|---|---|
| <input type="checkbox"/> Open (all are welcome) | <input type="checkbox"/> Non-Smoking | <input type="checkbox"/> IP Study | <input type="checkbox"/> Step Working Guide Study |
| <input type="checkbox"/> Closed (addicts only) | <input type="checkbox"/> Restricted Access | <input type="checkbox"/> It Works Study | <input type="checkbox"/> Guiding Principles Study |
| <input type="checkbox"/> Wheelchair accessible | <input type="checkbox"/> Smoking | <input type="checkbox"/> Just For Today Study | <input type="checkbox"/> Topic |
| <input type="checkbox"/> Beginner/Newcomer | <input type="checkbox"/> Women | <input type="checkbox"/> Literature Study | <input type="checkbox"/> Tradition |
| <input type="checkbox"/> Candlelight | <input type="checkbox"/> Young People | <input type="checkbox"/> Meditation | <input type="checkbox"/> Living Clean |
| <input type="checkbox"/> Children Welcome | <input type="checkbox"/> Basic Text | <input type="checkbox"/> Questions & Answers | <input type="checkbox"/> Format Varies |
| <input type="checkbox"/> LGBT | <input type="checkbox"/> 12 Concepts | <input type="checkbox"/> Speaker | |
| <input type="checkbox"/> Men | <input type="checkbox"/> Discussion/Participation | <input type="checkbox"/> Step | |

Additional information: _____

**using additional pages, complete for all days/times home group meets*

Intent:

To join Capital Area Narcotics Anonymous.

Carried _____

Failed _____

Tabled _____

Amended _____

Back to home groups _____

Policy change _____

Yes _____

No _____

Abstain _____